

UNIT 1 TOPIC 2

ALCOHOL AND DRUG ABUSE

LEARNING OBJECTIVES:

- 1.2.1 Explain the Navy's policy on alcohol and drug abuse.
- 1.2.2 Explain the health effects of alcohol and drugs.
- 1.2.3 Explain the Navy's tobacco cessation program.
- 1.2.4 Explain the Navy's Right Spirit Campaign.
- 1.2.5 Define how core values support the Navy's alcohol/drug abuse and tobacco cessation programs.

REFERENCES:

- 1. OPNAVINST5350.4C
- 2. <http://www.med.unc.edu/wrkunits/3ctrpgm/alcohol/prevention/safety.html>
- 3. <http://navdweb.spawar.navy.mil/>
- 4. <http://www.health.org/newsroom/>
- 5. <http://www.lifelines4qol.org>
- 6. <http://www.vnh.org>
- 7. SECNAVINST 5100.13B
- 8. <http://www.chinfo.navy.mil/navpalib/people/drugs/drug0821.html>
- 9. <http://www.samhsa.gov/oas/oasftp.htm>
- 10. NAVOP-08, 1996

SLIDES:

- 1-2-1 Alcohol and Drug Abuse
- 1-2-2 Why Care?
- 1-2-3 Trends and Stats
- 1-2-4 How Drugs Affect Your Health
- 1-2-5 Just Say No ... And No
- 1-2-6 Designer Drugs
- 1-2-7 Do You Know Designer Drugs

- 1-2-8 Navy's Policy on Drug Abuse
- 1-2-9 Tobacco Trends
- 1-2-10 Is It Worth It?
- 1-2-11 Navy's Tobacco Cessation Program
- 1-2-12 Alcohol Stats
- 1-2-13 How Alcohol Affects Your Health
- 1-2-14 Navy's Policy on Alcohol Abuse
- 1-2-15 Right Spirit Campaign
- 1-2-16 Core Values
- 1-2-17 Summary

CASE STUDIES:

None

VIDEO TAPES:

An Ecstasy Movie will be shipped separately and must be used in conjunction with this lesson.

NOTES TO THE FACILITATOR:

The main points of this topic are:

- Defining the Navy's policy on Alcohol and Drug Abuse including the Tobacco Cessation Program
- Identifying the types of drugs and the negative effects of alcohol and drugs.
- Underlining the importance of knowing the policies, programs, and resources in support of eradicating alcohol and drug abuse.
- Focusing the Navy's Core Values as key lifestyle elements in the fight against alcohol and drug abuse.

I. INTRODUCTION

According to the Department of Defense worldwide survey among military personnel, the usage of tobacco, alcohol, and illegal drugs are at the lowest rates since 1980. Although the numbers have decreased throughout the years, there is still cause for concern in further eliminating alcohol, drug, and tobacco use.

Alcohol and drug abuse according to OPNAV

5350.4C:

- Is a severe detriment to combat readiness in terms of performance, reliability, judgment, and time lost.
- Is incompatible with the maintenance of high standards of performance, military discipline and readiness.



INSTRUCTOR FACILITATION KEY

- Is destructive of Navy efforts to instill pride, promote professionalism, and enhance personal excellence.
- Is unhealthy and creates hardships on your family, friends, and finances.

SHOW SLIDE 1-2-1 ALCOHOL AND DRUG ABUSE

SHOW SLIDE 1-2-2 WHY CARE?

FACILITATOR KEY: To introduce topic, blend the thoughts presented here in the introduction with some of your own.

- *Emphasize* the negative effects that drug and alcohol abuse has on both your professional and personal lifestyle.
 - cost-expensive
 - habit forming
 - decreased performance
 - affect on children

II. INTRODUCTION TO DRUGS

- A. The U.S. has 6% of the world's population but we use 80% of the world's drug supply.
- B. Drugs and alcohol costs taxpayers nearly \$276 billion dollars a year in preventable health care costs, extra law enforcement, auto crashes, crime, and lost productivity.
- C. In 1999, an estimated 14.8 million Americans were current illicit drug users, meaning they had used an illicit drug within the past 30 days.
- D. There is an average of 1.5 million emergency room visits per year because of drug use.
- E. Most drug dealers only survive an average of 1.5-2 years before they are in jail or dead.
- F. Most drug dealers only make 2-300 hundred dollars a day.
- G. Over half of all federal prisoners are there because of drug offenses.
- H. Violent juvenile crime has risen by 118% over the last decade, much of that is due to drugs.

III. DRUGS

- A. *Drugs*, (including many prescription drugs) come with potentially harmful side effects that can have serious and long-term effects on your health.

SHOW SLIDE 1-2-3 TRENDS AND STATS**SHOW SLIDE 1-2-4 HOW DRUGS AFFECT YOUR HEALTH**

- High doses, impure or more dangerous substitutes can cause immediate life-threatening health problems such as heart attack, respiratory failure, and coma.
 - Combining drugs with each other or with alcohol is especially dangerous.
1. Barbiturates and tranquilizers - Are commonly abused prescription drugs. They can cause hangover-like symptoms, nausea, seizures, and coma. Overdose or mixing these drugs with alcohol can be fatal.
 2. Cocaine - Can cause such long-term problems as tremors, seizures, psychosis, and heart or respiratory failure.
 3. LSD - Can cause nausea, rapid heart rate, depression, and disorientation. Long-term effects include paranoia and psychosis.
 4. Marijuana and hashish - Can cause rapid heart rate and memory impairment soon after use. Long-term effects include cognitive problems, infertility, weakened immune system, and possible lung damage.
 5. Narcotics such as heroin - Can bring on respiratory and circulatory depression, dizziness, impotence, constipation, and withdrawal sickness. Overdoses can lead to seizures and death.

FACILITATOR NOTE:

Lead short discussion about types of drugs including prescription drugs.

It might seem intuitive, but say it again . . . alcohol and drugs are both wrong and used together they can be deadly!

SHOW SLIDE 1-2-5 JUST SAY NO...AND KNOW

6. PCP - in addition to triggering unpredictable and violent behavior, can cause dizziness, numbness, high heart rate and blood pressure, convulsions, and in high amounts fatal heart and lung failure or ruptured blood vessels.
7. Stimulants such as amphetamines - Have health effects that include high heart rate and blood pressure, headache, blurred vision, dizziness, impotence, skin disorders, tremors, seizures, and psychosis.
8. Methamphetamine - also known as crystal meth, crank, speed, chalk, glass, and ice, is an addictive stimulant drug that strongly activates certain systems in the brain.

Methamphetamines have some medical uses primarily in the treatment of obesity.

“Meth” produces such effects as increased wakefulness, increased physical activity, decreased appetite, increased respiration, irritability, insomnia, confusion, tremors, convulsions, anxiety, paranoia, and aggressiveness.

- B. ***Designer drugs*** are a whole new group of drugs which are produced by a minor modification in the chemical structure of an existing drug, resulting in a new substance with similar psychological effects.

SHOW SLIDE 1-2-6 DESIGNER DRUGS

DISCUSSION POINT	RELATED INSTRUCTOR ACTIVITY

These drugs evolved several years ago when people mixed and made substances out of home labs and formed products that produced hallucinogenic effects. Some of these substances ranged from common household products to everyday plants as well as some over-the-counter, human, and animal prescription drugs. Lets not forget some street

drugs are also used for making designer drugs.

Below are the most common of these designer drugs and their effects.

1. Ecstasy - an illegal synthetic, or designer drug.

It is also called MDMA, which stands for methylenediosymethamphe-tamine. The amount of MDMA needed to get “high” is close to the toxic dose. It is commonly used at “rave” party settings.

- Acts as a stimulant to the central nervous system.
- Can be found in a capsule, pill, or powder form of various colors.
- Costs between \$7 and \$30 per pill.
- Other names are wonder drug, Adam, Clarity, Essence, Stacy, Lover’s Speed, Eve and XTC.
- An Ecstasy high can last from six to 24 hours with the average trip lasting only about three to four hours.

SHOW SLIDE 1-2-7 DO YOU KNOW DESIGNER DRUGS

Definition:

A “rave” is a form of dance and recreation that is held in a clandestine location with fast-paced high-volume music, a variety of high tech entertainment, and often, the use of drugs.

DISCUSSION POINT

RELATED INSTRUCTOR ACTIVITY

- Effects- Include, but not limited to, detachment, loss of drives such as hunger, sleep, and sexual; nausea, vomiting, chills, sweating, tremors, muscle tension, blurred vision/rapid eye movements, hypertension, increase in heart rate, fainting, and death.
 - Can deplete as much as 90% of the brain's serotonin supply with 2 weeks of use. (Controls activities such as regulating aggression, thinking, sleeping, eating, sensitivity to pain, and mood.)
2. Herbal Ecstasy- Although not currently classified as a controlled substance, this is a drug composed of ephedrine (ma huang) or pseudoephedrine and caffeine (kola nut).
- Closely simulates the effects of Ecstasy.
 - Sold in tablet form.
 - Other names are Herbal X, Cloud 9, Herbal Bliss, Ritual Spirit, GWM, and X.
 - There is no quality control over the manufacture of these products, and problems arise because the amounts of ephedrine and caffeine in the pills vary widely.

DISCUSSION POINT	RELATED INSTRUCTOR ACTIVITY
<ul style="list-style-type: none"> ➤ Effects include, but are not limited to, high blood pressure, seizures, heart attacks, strokes, and death. Also contains less severe effects similar to those of Ecstasy. <p>3. <u>Date Rape Drugs</u>-Illegal Knockout drugs. The 2 most commonly known are Rohypnol and GHB.</p> <ul style="list-style-type: none"> a. Rohypnol <ul style="list-style-type: none"> ➤ Rohypnol is a strong sedative which is manufactured and distributed by Hoffman-La Roche. ➤ A member of the benzodiazepine family which includes drugs such as Librium, Xanax, and Valium, Rohypnol is about ten times the strength of valium. ➤ Rohypnol is smuggled in from the Mexican pharmacies. ➤ Other names are Rach, Ro-Shay, Roofies, Run-Trip-and-Fall, R-2, Mexican Valium, Rib, and Rope. ➤ Sold in tablet form. ➤ Costs between \$1 to \$5 per pill. b. GHB <ul style="list-style-type: none"> ➤ GHB was once sold in health food stores as an additive to body builder formulas. 	<p>FACILITATOR NOTE: Teaching Point--Date Rape Drugs not only knock you out, but leave you with little or no recollection of what happened while under the influence.</p>

DISCUSSION POINT

RELATED INSTRUCTOR ACTIVITY

- GHB is a central nervous system depressant that is abused for its intoxicating effects.
- In 1990, the FDA banned the use of GHB except under the supervision of a physician because of many reports of severe uncontrollable side effects.
- Other names for GHB are Easy Lay, Gook, Gamma 10, Liquid X, Liquid E, Liquid G, Georgia Home Boy, Soap, Scoop, Salty Water, Fantasy, and Organic Quaalude.
- Can be sold in capsule form or as a grainy, white to sandy-colored powder which is dissolved in liquids, but is most frequently sold as a slightly salty, clear liquid in small bottles where users pay by the capful or teaspoon.
- A capful may cost the user \$3 to \$5 per dose.
- c. Effects of both are:
 - Drowsiness followed by deep sedation
 - Slurred speech
 - Loss of muscle control
 - Confusion
 - Visual problems

4. Ketamine- primarily used in veterinary medicine, and its use as a surgical anesthetic in humans is limited. Also used as a date rape drug.
- Ketamine can be found in liquid form or as a white powder that is snorted or smoked with marijuana or tobacco products.
 - A combination of cocaine and Ketamine is called “CK”.
 - Other names are Special K, Vitamin K, New Ecstasy, Psychedelic Heroin, Ketalar, Ketaject, and Super K.
 - Effects are similar to those of PCP and include profound hallucinations, visual distortions, loss of senses, delirium, amnesia, impaired motor function, high blood pressure, depression, recurrent flashbacks, and potentially fatal respiratory problems.

IV. NAVY'S POLICY ON DRUG ABUSE**A. Characterization (Defined)**

1. *"Zero Tolerance"* - Involving the wrongful use, possession, manufacture, or distribution of a controlled substance.
 - a. Common controlled substances – Include but are not limited to cocaine, LSD,

Marijuana, hashish, heroin, PCP, amphetamines, barbiturates and tranquilizers.
 - b. Other controlled substances - The Navy policy also specifically precludes controlled substance analogues (designer drugs, the illicit use of inhalants (huffing), the illicit use of anabolic steroids, and the excessive use of prescription or over the counter drugs.
 - c. A 'controlled substance' - Any substance

listed in the Controlled Substance Act of 1970.

B. Consumption

1. Use -encompasses all methods of introducing a drug into your body (such as inhaling, injecting, ingesting, etc.).

SHOW SLIDE 1-2-8 NAVY'S POLICY ON DRUG ABUSE

Name more?

Schedules I through V (21 U.S.C. 812, et al.)

DISCUSSION POINT

RELATED INSTRUCTOR ACTIVITY

2. Wrongful - Use, possession, manufacture are wrongful if they are without legal justification or authorization.

C. Consequences

1. Drug abuse and related disciplinary action is punishable under Article 112a, UCMJ or Failure to obey a Lawful Order, Article 92, UCMJ or adverse administrative action.
2. Navy members determined to be using drugs, in violation of applicable provisions of the UCMJ, Federal, State, or local statutes, shall be disciplined as appropriate and processed for administrative separation as required.

D. Cure

1. Urinalysis
 - a. Active and aggressive program - All commands are required to have a urinalysis program tailored as necessary to meet unique unit and local situations.
- 2 Screening
 - a. Navy members who abuse drugs, including those who are self-referred will be screened, disciplined as appropriate, and processed for administration separation.

Reinforce: Sailors can be tested for prescription drugs and it is important to use them according to the dosage on the bottle. Also, don't use someone else's prescription drugs.

DISCUSSION POINT

RELATED INSTRUCTOR ACTIVITY

3. Treatment
 - a. Members diagnosed, as drug dependent shall be offered treatment before separation.
4. Education
 - a. All Navy military personnel shall be educated about Navy drug and alcohol abuse policies, programs, resources and measures to avoid alcohol and drug abuse.

V. INTRODUCTION TO TOBACCO

- A. An estimated 66.8 million Americans reported current tobacco use in 1999, a prevalence rate of 30.2% of the population age 12 and older.
- B. Smoking is the major cause of heart disease.
- C. After a person quits smoking, it takes 10 years to replace any precancerous cells in the body.

SHOW SLIDE 1-2-9 TOBACCO TRENDS

VI. TOBACCO

A. Background

1. If you have tried to quit smoking, you know how hard it can be. Nicotine is an addictive drug. Within seconds of taking a puff of smoke, nicotine travels to the brain telling it to release chemicals that make you want to smoke more.
2. Have you ever smoked other people's cigarettes just by being in the same room with smokers?
 - a. Environmental Tobacco Smoke (ETS) is a major source of harmful indoor air pollution containing formaldehyde, cyanide, and other toxins.
 - b. Approximately 3,000 per year die from exposure to ETS.
3. Tobacco use is considered the chief preventable cause of premature death and disease in the United States.
 - a. More than 430,000 deaths (19% of total deaths) annually.

B. Tobacco/Nicotine Facts

1. Spit tobacco is not a safe alternative to cigarettes.
 - It contains nicotine and a number of known cancer-causing agents.
 - It is highly addictive.

For some people, it can be as addictive as any other drug such as cocaine or marijuana.

SHOW SLIDE 1-2-10 IS IT WORTH IT?

Tobacco use causes about one of every five deaths in the United States.

- Can cause oral cancer and other serious medical conditions.
- 2. Nearly all first use of tobacco occurs before high school graduation.
- 3. Smoking is the single greatest cause of death in the United States.
- 4. 3,000 children start smoking everyday -- 1,000 of who will eventually die from smoking.
- 5. In addition to loss of life, cigarettes cost \$68 billion in health care and insurance as well as causing lost productivity.
- 6. The first metabolite of nicotine is acetaldehyde. This is also the first metabolite of alcohol.
 - Some researchers believe that there is a cross addiction between drinking alcohol and smoking.
- 7. Statistics show that there is a much higher rate of smoking among drinkers than non-drinkers.

C. Policy

1. It is Department of the Navy policy to reduce tobacco use and protect personnel from involuntary exposure to environmental tobacco smoke (ETS) to the greatest extent possible.

SHOW SLIDE 1-2-11 NAVY'S TOBACCO CESSATION PROGRAM

DISCUSSION POINT

RELATED INSTRUCTOR ACTIVITY

- a. Where conflicts arise between the rights of nonsmokers and the rights of smokers, the rights of nonsmokers to a smoke-free airspace shall prevail.
2. The objective is to establish appropriate environmental protective measures to ensure a safe, healthy, and unpolluted working and living environment.
3. The Department of the Navy's approach is designed to improve our overall state of health and our ability to maintain a high state of military readiness.
4. Specifically, smoking of tobacco products is prohibited: in all Department of the Navy controlled spaces except as noted below: (designated smoking area may be authorized)
 - a. Individual Living Quarters ashore
 - b. Multiple Housing Units
 - c. Morale, Welfare and Recreation Facilities
 - d. Surface Ships and Submarines
 - e. Outdoor areas

D. You Can Quit Smoking. Help Is All Around You!

1. Many types of health care providers can help you quit --- your family doctor, dentist, or pediatrician, nurses, psychologists, pharmacists, respiratory and physical therapists, and others. Help is readily available through your command hospital or clinic.
2. Programs are given by health care providers who specialize in helping people stop smoking. Your regular health care provider can help you find a program.
3. Approximately 85-95% of people quit on their own by going cold turkey. But for those who can't do it cold turkey, here are some methods for quitting.
 - a. Experts say three methods work. You have the best chances of quitting if you use them together:
 - (1) Use the nicotine patch or gum
 - As recommended by your regular health provider.
 - Doubles your chances of quitting.
 - (2) Get support and encouragement
 - Counseling or a quit smoking program can help you learn how to live as a nonsmoker.

DISCUSSION POINT

RELATED INSTRUCTOR ACTIVITY

- The more counseling you have, the greater your chance of success.
- (3) Learn how to handle stress and the urge to smoke.
 - Be aware of things that may cause you to want to smoke.
 - Take time to do things you enjoy.
 - Exercise, such as walking, jogging, or bicycling can also help.
 - The key to handling an urge is to distract yourself from thoughts of smoking.
 - Make Change Before You Quit.
 - Change your environment.
 - Begin to change habits.
 - Review your past attempts to quit. Think about what worked and what did not.
- 4. Remember: Set a quit date and stop smoking ...not even a single puff.

E. Tobacco Cessation Summary

1. Complete guidance on the program is in SECNAVINST 5100.13B and as well as your command representatives.

DISCUSSION POINT: Some examples include: Get rid of cigarettes and ashtrays in your home, car, and place of work. Get rid of the smell of cigarettes in your car and home. Avoid other tobacco products, such as cigars, pipes, and chewing tobacco.

Avoid smoking in places where you spend a lot of time, such as your home or car.

VII. INTRODUCTION TO ALCOHOL

- A. Almost half of Americans ages 12 and older reported being current drinkers of alcohol. This translates to an estimated 105 million people.
- B. In the next 30 days, 17% of all 7th graders will use alcohol. 25% of all 9-12th graders will use enough alcohol to be defined as heavy drinkers.
- C. Every 40 minutes a kid is arrested for drunk driving.

VIII. ALCOHOL

- A. Alcohol has many effects on one's health.
- B. The first amount of alcohol reaches the brain about 30 seconds after ingestion. It passes first through the stomach and small intestine, where it is absorbed into the bloodstream. When it reaches the brain, alcohol acts primarily on nerve cells. Some illnesses and health problems caused by alcohol include:
 - 1. Hangovers - Headaches, nausea, vomiting, disorientation, irritability and tremors all result from drinking too much. Drinking to the point of drunkenness makes you sick and at high risk

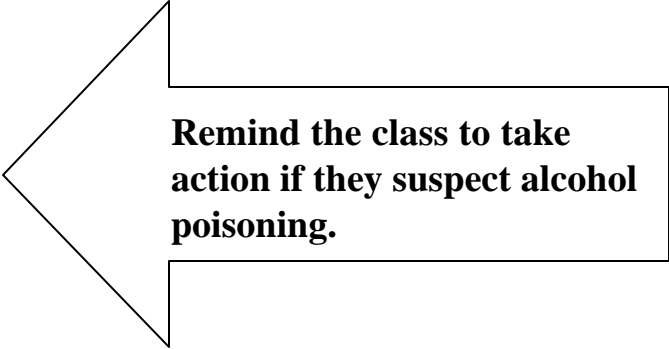
SHOW SLIDE 1-2-12 ALCOHOL STATS**SHOW SLIDE 1-2-13 HOW ALCOHOL AFFECTS YOUR HEALTH**

- for alcohol poisoning.
2. Weight gain - Alcohol is not water. A beer has about 150 "empty" calories that provide few, if any, nutrients.
 3. Blackouts - A state of temporary amnesia which occurs during or following the consumption of large amounts of alcohol. A person experiencing a blackout is awake and functioning during the time they are having a blackout, but is unable to partially or fully recall events later, when sober.
 4. High blood pressure - Along with being overweight, high blood pressure is associated with many serious health problems.
 5. Depressed immune system - Impaired immunity makes you more likely to contract viral illnesses such as flu and infections.
 6. Cancer - 2-4% of all cancer cases are related to alcohol:
 - Upper digestive tract cancers are the most common, hitting the esophagus, mouth, larynx, and pharynx.
 - Women who drink before menopause are more likely to develop breast cancer.
 - Your risk of skin cancer doubles if you drink slightly more than "moderate levels."

- Some studies implicate alcohol in colon, stomach, pancreas and lung cancer.
7. Liver disease - Heavy drinking can cause fatty liver, hepatitis, cirrhosis and cancer of the liver. 90% of ingested alcohol is metabolized by the liver and eliminated at the rate of a half ounce of alcohol per hour.
8. Alcohol poisoning - Drinking large amounts can result in alcohol poisoning, which causes unconsciousness and even death. Breathing slows and the skin becomes cold and may look blue.

***Don't let a person in this condition
"sleep it off." Call 911.***

9. Heart or respiratory failure - Excessive drinking can have serious results. Heart or respiratory failure often means death.
10. Other long-term effects - Loss of appetite, vitamin deficiencies, stomach ailments, sexual impotence, central nervous system damage, and memory loss.
11. Alcoholism - The widely used definition of alcoholism is a chronic progressive treatable disease in which a person has lost control over his or her drinking so that it is interfering with some vital area of life. Alcoholics are unable



**Remind the class to take
action if they suspect alcohol
poisoning.**

to control their drinking--how much, when, and if.

- Alcoholism puts you at great risk for other health problems.
- It can shorten your life by more than 10 years.
- Through education, treatment, and self-help support, people can learn to live alcohol-free and feel good.

IX. NAVY'S POLICY ON ALCOHOL ABUSE

A. Characterization (defining)

1. Responsible use - Which means, the application of self-imposed limitations of time, place, and quantity when consuming alcoholic beverages.
 - a. It is a personal decision of individual members as to whether or not to consume alcoholic beverages. If you choose to drink, do so in an appropriate place, at an appropriate time, and in an appropriate quantity.
 - b. Abstinence, the choice not to drink alcohol, is always a responsible option.

FACILITATOR NOTE:

Chances are excellent that you have someone in your group who can relate an experience where alcohol has had a negative effect on someone's health. You either share a story about someone or see if someone in the class can relate to this are (don't use real names).

SHOW SLIDE 1-2-14 NAVY'S POLICY ON ALCOHOL ABUSE

AMPLIFYING POINTS:

Alcohol consumption is never an acceptable excuse for misconduct or poor judgment. It neither grants permission or excuses behavior.

Members who choose to use alcohol must do so lawfully and responsibly. Abstinence should be supported and encouraged. If you are alcohol free . . . remain so!

B. Consumption

1. *“Alcohol consumption is never an acceptable excuse for misconduct or poor judgment”*

a. Alcohol shall not be consumed to the extent that it:

- Impairs the rational and full exercise of mental and physical faculties while on duty or in the performance of military duties.
- Reduces your dependability and reliability.
- Reflects discredit on you, your command, or the Navy.

b. The Navy does not condone the consumption of alcoholic beverages during normal working hours.

- By way of limited exception, COs and OICs may authorize consumption for official functions, ceremonies, and other infrequent command-sponsored events.

Reference: OPNAV 5350.4C

- By way of cognizant authority at unified/joint/combined, commands may authorize consumption for certain social occasions and events when participation by Department of the Navy personnel is expected to foster good will and promote international and/or community relations.
- c. Responsibility and moderation will be emphasized at all events and alcohol should be deglamorized for use during traditional ceremonies by forbidding those practices that may encourage anyone to drink irresponsibly.

C. Consequences

1. *“All military personnel are ultimately responsible for their own actions.”*
 - a. Violation of the prohibitions discussed above and as outlined in the current OPNAV directive subjects you to disciplinary action under the UCMJ.
 - b. The full range of administrative and disciplinary actions from counseling, comments in evaluations and fitness reports, administrative separation, and punitive measures under the UCMJ is available to address violations.

Reference: OPNAV5350.4C

D. Cure

1. *“Alcohol dependence and alcohol abuse are treatable”*

a. Recognizing the investment the Navy has in its sailors, it is imperative that as many members who are diagnosed as alcohol abusers or as alcohol dependent be returned to full duty status upon successful completion of prescribed education, intervention, and treatment.

b. Command prevention programs are not considered treatment.

c. Referral for treatment procedures is available for alcohol abuse or alcohol dependence through your command Alcohol and Drug Abuse Manager.

X. THE RIGHT SPIRIT CAMPAIGN

A. The Navy “Right Spirit Campaign” is an ongoing SECNAV-sponsored Alcohol Abuse Prevention and Alcohol Use Deglamorization campaign to reduce the incidence of alcohol abuse and to deglamorize drinking.

B. One of the main goals of the Right Start Campaign is to significantly reduce alcohol abuse and its effects on fleet readiness in terms of lost work

Reference: OPNAV5350.4C

SHOW SLIDE 1-2-15 RIGHT SPIRIT CAMPAIGN

Reference: NAVOP-08, 1996

DISCUSSION POINT

RELATED INSTRUCTOR ACTIVITY

days, deaths, injuries, and disciplinary incidents resulting from UCMJ and civil criminal infractions.

- C. Another goal is to become active in changing perceptions that drinking is in any way central to our traditions and lifestyles. This can be accomplished by taking immediate, decisive steps to deglamorize alcohol and to stop alcohol abuse and related incidents.
- D. In order to accomplish its goals, the Right Spirit Campaign stresses responsibility and accountability at all levels, from seaman recruit to admiral.
- E. The Right Spirit Campaign is a long term campaign and by working as a team the Navy can establish the “Right Spirit” and the right environment to prevent alcohol abuse problems before they destroy lives and before they impact the Navy.

XI. CORE VALUES

- A. The Navy’s Core Values reflect throughout the high standards of performance and readiness in the fight against alcohol and drug abuse.

SHOW SLIDE 1-2-16 CORE VALUES

DISCUSSION POINT	RELATED INSTRUCTOR ACTIVITY
<ol style="list-style-type: none"> 1. Honor <ol style="list-style-type: none"> a. Among leadership and sailors that cause them to care enough about shipmates to ensure ‘<i>zero tolerance</i>’ of drugs and ‘<i>responsible use</i>’ of alcohol and to encourage a ‘<i>tobacco free</i>’ work environment. 2. Courage <ol style="list-style-type: none"> a. That causes leaders to assume responsibility for enforcing Navy policies and educating sailors on the pitfalls of alcohol and drug abuse as well as setting the example for a tobacco free workspace. b. That causes every Navy member to assume personal responsibility for his or her actions in alcohol/drug abuse and supporting the tobacco cessation program. 3. Commitment <ol style="list-style-type: none"> a. For all Navy members to instill pride promotes professionalism and enhance personal excellence as the major deterrence to alcohol and drug abuse. 	<p>FACILITATOR NOTE:</p> <p>Alcohol/drug abuse and tobacco use reduction is a great area to demonstrate values.</p> <p>Dealing with addictions is never easy.</p> <p>It takes an extra effort to ‘stand up and be counted.’</p> <p>It takes a committed professional or friend to perform an honorable and courageous act to help a shipmate deal with alcohol or drugs.</p>
<p>XI. SUMMARY</p> <p>A. This training lesson:</p> <ol style="list-style-type: none"> 1. Discussed alcohol and drug abuse and the tobacco cessation program. 	<p>SHOW SLIDE 1-2-17 SUMMARY</p>

DISCUSSION POINT

RELATED INSTRUCTOR ACTIVITY

2. Identified facts, problems and the negative aspects of alcohol and drug abuse as well as the use of (and methods to quit using) tobacco.
3. Outlined the Navy's policy on alcohol and drug abuse and the tobacco cessation program.
4. Outlined the role of the Right Spirit Campaign in the fight against alcohol.
5. Focused reminder of key role that Core Values play in the fight against alcohol and drug abuse.

Remember: The Navy is here not to condemn someone with a problem, but to help them. If you think you have a problem with drugs or alcohol, contact your command Drug and Alcohol Prevention Assistant (DAPA) and get help today.

FACILITATOR NOTE:

The 'take away' from this lesson is alcohol and drug abuse is wrong, and there is assistance available.

The Navy has a clear policy of 'responsible use' and 'zero tolerance' regarding alcohol and drugs.